

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE NORTHERN DISTRICT OF TEXAS
DALLAS DIVISION

Action
No Action ☒ ☐
ID Checked ☒ ☐ DR1 ☐ DR2 ☐
SS Checked ☒ ☐ DR1 ☐ DR2 ☐
Returned Tax Returns to DR ☐

IN RE:

CARMEN ADRIANA DE LA TORRE
DEBTOR(S),

Case No. 08-36278-HDH-13

Judge: HARLIN D. HALE

REPORT OF (ADJOURNED) SECTION 341 MEETING

Meeting Information: Meeting Date: Mon Feb 02, 2009 DFPD: 63 Original 341: Jan 12, 2009
Debtor(s) Appeared? ☒ Yes ☐ No (DR1) / (DR2)
Debtor(s) attorney/paralegal appeared? ☒ Yes ☐ No Pro-se
Creditors Appeared? ☒ Yes ☐ No
Name: Matt Forester Representing: Tex Mutual Ins
Lo Carey IRS
Business Case: ☒ Yes Level ☐ No
341 meeting concluded: ☒ Yes ☐ No

Adj Date: _____; To Hear; Reason: _____

Debtor was asked standard questions : Circle one Y or N

Need NOI for: _____ Failure to Appear (DR1) / (DR2) _____ Picture ID (DR1) / (DR2)

SSN (DR1) / (DR2)

Wage Order Information (DR1) / (DR2) _____ Paystubs (DR1) / (DR2)

Tax Returns: _____ DSO Information: _____

Other: _____

No Show/ID NOI Sent: 01/13/2009Payment Information:

Current monthly payment : \$ 400.00
\$ rec'd as of January 27, 2009 : \$ 400.00

Plan Base: \$ 24,000.00
First Payment due: Dec 31, 2008
Length of Plan: 60

Trustee Action Needed:

Trustee's Motion to Transfer Venue needed: _____

Trustee's Objection to Exemptions needed for: _____

Other: _____

Circle one: Debtor confirmed that all the information contained on the Petition, Schedules,
Y or N Statement of Financial Affairs, and CMI form was true and correct and needed no
changes or additions to make them true and complete.



N G 1



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Debtor(s) CARMEN ADRIANA DE LA TORRE

Confirmation Issues

1. **BEST INTEREST:** ☒ Exemptions: ☒ Federal; ☐ Texas State; ☐ State other than TX: _____

Exceeds \$125,000 Y or ☒ N

Value (equity) of non-exempt property (See #12 for more details): \$ _____

Total Value of Assets listed as Exempt on Schedule C: 102,700

Improper Exemptions: Circle one: Y or ☒ N Explain: _____

Fraudulent Transfer: Circle one: Y or ☒ N Explain: _____

Refer to Legal: _____

2. **DISPOSABLE INCOME:**

A) **Below Median Income:** DR's Proj Monthly Disp. Income: _____ x 36= _____

Comment: _____

B) **Above Median Income (CMI Form):**
DR's Monthly Disposable Income: \$6,84 X ACP: 60 = Unsec. Pool: \$ 37,040

Line _____ Notes: under Haracue CMI is - 0 -

Line _____ Notes: _____

Refer to Legal: _____

3. **FEASIBILITY:** Circle one: ☒ Y or N Reason if No: _____

Refer to Legal: _____

4. **GOOD FAITH** Petition and Plan: Circle one: ☒ Y or N Reason if No: _____

Refer to Legal: _____

5. **DOMESTIC SUPPORT OBLIGATION (DSO):**

Debtor owes post petition DSO: Current? Circle one: ☒ NA Y or N

Refer to Legal: _____

6. **TAX RETURNS:**

Filed previous 4 years: Circle one: ☒ Y or N Specify: _____

Number of Dependants on last year: _____ Notes: _____

Number in Household per CMI: _____ Notes: _____

Refer to Legal: _____

7. **BUSINESS CASE:**

____ Self-Employed

____ Incurs Trade Debt

____ Employees

____ Refer to Business Case Analyst

____ Liquor License
____ Over \$15,000 per/mo.

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Presiding Officer Signature